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PTO/SB/30 (09-04)
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Request	Application Number	09/752,666		, 0.	- 1
for	Filing Date	12/28/2000			1
Continued Examination (RCE)	First Named Inventor	LIEBENOW.	Frank		
Transmittal Address to:		2153			
Mail Stop RCE	Art Unit	STRANGE.	Aaron N.		
Commissioner for Patents P.O. Box 1450	Examiner Name			j	
Alexandria, VA 22313-1450	Attorney Docket Number	P1650US00		1	
This is a Request for Continued Examination (RCE) Request for Continued Examination (RCE) practice under 37 C 1995, or to any design application. See instruction Sheet for RC	FR 1.114 does not apply to any ut	iny or pient sp	pucation tiled prior to June 6,		
Submission required under 37 CFR 1.114 No amandments enclosed with the RCE will be entered in the applicant does not wish to have any previously filed uner amandment(e).	ne order in which they were filled un htered amendment(s) entered, app	iless applicant dicant must rec	instructs otherwise. If juest non-entry of such		
8. Previously submitted. If a final Office action is considered as a submission even if this box is			onice action may be		
i. Consider the arguments in the Appeal 8	rief or Reply Brief previously filed	on			
11.					
b. Enclosed I. Amendment/Repty	III Information	. Dischause S	tatement (IDS)		
		. 5100100010			
	Other		 .		
2. Miscellaneous Suspension of action on the above-identified	epplication is requested under 37	CFR 1.103(c)	for a		
a period of months. (Period of suspens					
b. Other					03 FOE
3. Fees The RCE fee under 37 CFR 1.17(e) is require. The Director is hereby authorized to charge the			•	,	33 18
a. Deposit Account No. 50-0439				estroneo	03/05/5002
RCE fee required under 37 CFR 1.17(e))				37337 307 20
ii. Extension of time fee (37 CFR 1.135 and 1	17)				
iii. Other One extra total claim (over 20)					
b. Check in the smount of \$	enclosed	• •	·		
c. Payment by credit card (Form PTC-2038 enclose					
WARNING: Information on this form may become public. Count information and authorization on PTO-2038.	redit card information should no	t be included	on this form. Provide credit		
SIGNATURE OF APPLICA	ANT, ATTORNEY, OR AGENT RE			1	
Signature Control	Date	istration No.	December 27, 2004	ĺ	
Name (Print/Type) Jeffrey Pershi			35,987	, 1	
the service was the commenced on to being departed with the Link	F MAILING OR TRANSMISSION and States Postel Bervice with sufficient	postage as first	ctass mail in an envelope		
Interest of the Media Stop RCE, Commissioner for Petents, P. O. Box 1450 Office on the date shown below.), Alexandrie, VA 22313-1450 or faceim	ille transmitted to	the U.S. Patent and Tredemark		
Signature Call need					
Name (PrintType) Jaffrey A. Prochi		December 27		i	
This collection of information is required by 37 CFR 1.114. The information is process) an application. Confidentially is governed by 35 U.S.C. 122 including gathering, preparing, and submitting the completed application					

streaming grantering, properting, and complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mell Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need exsistance in completing the form, cell 1-800-PTO-9199 and select option 2.

PAGE 2/14 * RCVD AT 12/27/2004 5:11:36 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/1 * DHIS:8729306 * CSID:605 3361931 * DURATION (mm-ss):04-34

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number				
CLAIMS AS FILED – PART I (Column 1) (Column 2)					_	SMALL ENTITY		OR	OTHER THAN ŞMALL ENTITY		
FOR NUMBER FILED NUMBER E		R EXTRA	ſ	RATE	FEE		RATE	FEE			
BASIC FEE (37 CFR 1.16(a))						s	OR		s <u>79</u> 0.		
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = . D C E		7	Ţ	x \$=		OR	× s =				
INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = 1			t	× \$ =		OR	x s=				
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					 	+s =		OR	+s =	V	
* If the difference in column 1 is less than zero, enter "0" in column 2.						L	TOTAL		OR	TOTAL	PAID
CLAIMS AS AMENDED – PART II											
12	27/04	(Column 1)		(Column 2)	(Column 3)		SMALL E	ENTITY	OR		R THAN ENTITY
Ø LN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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EN I	Independent (37 CFR 1.16(b))	4	Minus	"" 4	" ~		x \$=		OR	x \$=	
AM	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))		+ \$=		OR	+\$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							TCTAL ADD'L FEE		OR.	TOTAL ADD'L FEE	PAID
	(Column 1) (Column 2) (Column 3)										
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AM		TATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))		+\$ =		OR	+ \$=	
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(Column 1) (Column 2) (Column 3)											
NT &		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2u, enter 2u.
"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.